CLAIMS ONLY

Application Number	Filing Date
10/551614	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1	✓						51							
2		✓					52							
3		✓					53							
4		✓					54							
5		✓					55							
6		✓					56							
7		✓					57							
8		✓					58							
9		✓					59							
10	✓						60							
11		✓					61							
12	✓						62							
13	✓						63							
14	✓						64							
15	✓						65							
16	✓						66							
17	✓						67							
18		✓					68							
19		✓					69							
20		✓					70							
21							71							
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44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	8						Total Indep							
Total Depend	24						Total Depend							
Total Claims	32						Total Claims							